

## ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	MD	76536	07-02-89
O.I.P.E. CLASSIFIER	MS	45	7/7
FORMALITY REVIEW	SES	65085	5/16/99

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
1	1/2/89
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here